

# HOSPITAL INSPECTOR RE-CERTIFICATION SEMINAR SCHEDULE FOR 2008

## SEMINAR & RECERTIFICATION EXAM REGISTRATION

**Over  $\Rightarrow$**

Please submit a completed registration form and your payment to:

**Office of Statewide Health Planning & Development  
Facilities Development Division  
1600 9th Street, Room 420  
Sacramento, CA 95814**

**Attn: Patricia Friel**

Confirmation of attendance will be mailed upon receipt of this registration form AND applicable fee(s). Additional information regarding the facility, hotel accommodations and parking will be sent with your registration confirmation.

Registration fees will not be refunded for NO SHOWS.

For more information call (916) 654-8458.